

Document 00472

BIDDER'S MWSBE GOAL DEVIATION REQUEST

Bidder or Proposer Name: _____

Project Name & Bid/Contract #: _____

**Department Approved
MWSBE Goals**

MBE	WBE	SBE	Total
%	%	%	%

**Bidder's Proposed
MWSBE Goals**

MBE	WBE	SBE	Total
%	%	%	%

Justification: Please provide the reason the Bidder is unable to meet the Contract Goal in Form 00800.

Good Faith Efforts: Please list any efforts not listed in the Bidder's Good Faith Effort Report (Form 00471).

Date: _____

Bidder: _____

Email: _____

By: _____

Phone Number: _____

Title: _____

FOR OFFICIAL USE ONLY: Approved ☐

Not Approved ☐

OBO Representative

Date: _____

Title: _____